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## BIB DATA SHEET

CONFIRMATION NO. 5797

<b>SERIAL NUMBER</b> 10/758,513	<b>FILING or 371(c) DATE</b> 01/15/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> Serie 6093		
<b>APPLICANTS</b> Marc Lemaire, Paris, FRANCE; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> FRANCE 0350002 01/15/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/19/2004						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/ERNST V. ARNOLD/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 14 26	<b>INDEPENDENT CLAIMS</b> 2 3
<b>ADDRESS</b> Linda K. Russell Air Liquide Suite 1800 2700 Post Oak Blvd. Houston, TX 77056 UNITED STATES						
<b>TITLE</b> Use of N2O in the treatment of post-ischemic brain cell deterioration						
<b>FILING FEE RECEIVED</b> 1278	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			